

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b
☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Bill White for Texas

A. Full Name (Last, First, Middle Initial) Charles Iupe		Date of Disbursement MM / DD / YYYY 03 / 08 / 2010	
Mailing Address 2128 Chilton Road			
City	State	Zip Code	
Houston, TX		770191504	
Purpose of Disbursement Refund of 12/14 not deposited, reissued		Amount of Each Disbursement this Period -2,100.00	
Candidate Name		Category/ Type 010	
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

B. Full Name (Last, First, Middle Initial) Joseph Jamail		Date of Disbursement MM / DD / YYYY 03 / 11 / 2010	
Mailing Address 3682 Willowick Road			
City	State	Zip Code	
Houston, TX		770191114	
Purpose of Disbursement Refund of 12/12 not deposited, reissued		Amount of Each Disbursement this Period -2,200.00	
Candidate Name		Category/ Type 010	
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

C. Full Name (Last, First, Middle Initial) Joseph Jamail		Date of Disbursement MM / DD / YYYY 03 / 11 / 2010	
Mailing Address 3682 Willowick Road			
City	State	Zip Code	
Houston, TX		770191114	
Purpose of Disbursement Reissue of refund		Amount of Each Disbursement this Period 2,300.00	
Candidate Name		Category/ Type 010	
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

-2,000.00